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TB CARE I

TB CARE I-Kazakhstan

**Year 1
Quarterly Report
October-December 2011**

January 30, 2012

Quarterly Overview

Reporting Country	Kazakhstan
Lead Partner	KNCV
Collaborating Partners	N.A.
Date Report Sent	
From	Svetlana Pak
To	Bryn Sakagawa, USAID CAR
Reporting Period	October-December 2011

Technical Areas	% Completion
1. Universal and Early Access	78%
2. Laboratories	70%
3. Infection Control	88%
4. PMDT	89%
5. TB/HIV	100%
6. Health Systems Strengthening	86%
7. M&E, OR and Surveillance	75%
8. Drug supply and management	100%
Overall work plan completion	86%

Most Significant Achievements

Laboratory:

1. A two-day regional workshop on GeneXpert was conducted on 15 - 16 November with technical assistance of WHO and in collaboration with the Quality project to introduce new technology and help NTPs and partners to plan implementation of GeneXpert in CA countries. Country teams discussed placement of GeneXpert in diagnostic algorithms per country. Draft diagnostic algorithms have been developed by country teams.
2. Xpert Implementation plan and diagnostic algorithms have been drafted during a two-week TA mission from Manuela Rehr from PMU TBCARE conducted after the regional workshop.
3. Clinical protocol, recording and reporting forms have been revised for Xpert implementation by the Xpert implementation working group with TA of Manuela Rehr.
4. Assessment of facilities for selection of Xpert sites was conducted in Eastern Kazakhstan and North Kazakhstan oblasts by regional laboratory TO.
5. Maintenance guidelines and draft SOPs for laboratory equipment were developed.

Infection control:

1. TA was provided by the Regional TB-IC consultant Vlad Furman for finalization of the National TB-IC plan and adaptation of the TB-IC assessment tool. The national TB-IC plan was finalized and submitted to the MoH. The assessment TB-IC tool was adjusted to Kazakhstan and was sent for comments to partners. It will be a part of the national TB-IC guideline.
2. TB-IC national order was drafted by the IC thematic working group and sent to prison system for comments.

PMDT:

1. PMDT action plans in new project sites (Akmola, South Kazakhstan and North Kazakhstan) were developed and submitted to the oblasts healthcare authorities for approval.
2. MDR TB protocols were revised by MDRTB thematic working group.
3. Protocol on TB in children for KZ was drafted in accordance with the latest WHO recommendations.

TB-HIV:

The national TB-HIV plan and prikaz were finalised and submitted to the MoH for approval.

Patient support:

1. Two hundred forty three TB/MDR TB patients have been enrolled in a patient support program in East Kazakhstan oblast.
2. Agreement was achieved with key partners (oblast akimat, TB service, prison system, Department of Social Affairs, Department of Labor, migration police and others) to establish oblast's working group on development of patient support system in two new project sites - North Kazakhstan and South Kazakhstan.
3. Tool for monitoring of patient support program tested in EKO and finalized.

M&E and OR:

1. Recording & reporting forms revised, i.e. laboratory and drug management parts have been edited because of implementation of new diagnostic and treatment algorithms.
2. OR protocol on Effectiveness of patient support in EKO was drafted.

Drug management:

1. Specialists from project sites have been trained on basic skills to calculate the needs in FL and SLDs.
2. Draft tool for calculation of needs in FL and SLDs have been developed.

A joint USAID Washington, PMU TB CARE I and KNCV HQ mission was conducted on 12-16 December to improve management and communication issues.

A one-week mission was conducted by the Project Officer and Financial Officer from KNCV HQ on 12- 16 December to provide administrative and financial support to the regional office.

Overall work plan implementation status

Implementation of project activities in the prison system are postponed until MoU with MoIA is signed. Documents (copy of KNCV statute paper, draft MoU, history of KNCV collaboration with prison system in Kazakhstan, activities description) requested by the MoIA have been submitted in the end of November. Based on approval of the mission, a regional workshop on GeneXpert implementation was conducted for CA countries in November.

USAID CAR in principle agree to give extension for implementation of APA1 till February 2012 during joint mission of USAID Washington, PMU TB CARE I and KNCV HQ in Kazakhstan.

Technical and administrative challenges

Since the NTP made the decision to revise national guidelines on TB/MDR TB, finalization of clinical protocols and training curricula have been postponed.

Since MoU between KNCV and MoIA is not signed yet, supervision visits, workshops for prison administration and training for prison medical staff are postponed.

Cancellation of GFATM Round 11 and reduction of funds for 2nd phase Round 8, required revision of plan for GeneXpert implementation.

Quarterly Technical Outcome Report

	2010*	2011**
Number of MDR cases diagnosed	7336	7386
Number of MDR cases put on treatment	5740	5311

* January - December 2010 ** January - December 2011

Technical Area 1. Universal and Early Access								
Expected Outcomes		Outcome Indicators	Indicator Definition	Baseline	Target	Result	Highlights of the Quarter	Challenges and Next Steps to Reach the Target
					Y1	Y1		
1	Improved TB control in prisons	Bacteriologically confirmed TB cases in prisons reported to NTP	Bacteriologically confirmed TB cases reported in prisons in project sites (indicator for case detection), disaggregated by culture and DST results (indicator for access to bacteriological examinations in prison)	Case detection: South Kazakhstan (SKO) - 64,2% Nord Kazakhstan (NKO) - 27% Akmolinskaya (Akm) - 37,2% East Kazakhstan (EKO) - 27,2% Culture coverage: SKO - 61% NKO - 62% Akm - 0% EKO - 68,2% DST coverage: SKO - 100% NKO - 100% Akm - 0% EKO - 100%		Case detection: SKO - 57,8% NKO - 28% Akm - 43,8 EKO - 24,7% Culture coverage: SKO - 90% NKO - 75% Akm - 54% EKO - 70,7% DST coverage: SKO - 100% NKO - 100% Akm - 100% EKO - 100%	Workshop on TB for prison administrations and heads of medical services, supervision visits to prisons were moved to APA2.	New MoU with prison system is still under revision of the MoIA. Additional documents have been submitted upon request of the MoIA. Since MoU was not signed in December 2011 remaining activities have been moved to APA2.

2	Strengthened TB control in migrants	TB cases in migrants reported to NTP among the total number of TB patients	TB cases in migrants reported to NTP among the total number of TB patients	Akm - 3,3% SKO - 2,1% NKO - 0,7% EKO - 0,2%		Akm - 1,1% SKO - 1,5% NKO - 0,6% EKO - 4,0%	TB CARE got preliminary agreement from NTP to establish thematic working group on TB in migrants. EurAsES agreed to open its platform for TB CARE to promote cross border TB control in EurAsES countries.	Since it is a sensitive issue , establishment of TWG on TB in migrants at NTP level will be done after regional high level meeting on cross border TB control. Therefore, establishment of TWG on TB in migrants was moved to APA2. One of the possible reason for the go down compared to the baseline is observed seasonal migration.
3	International standards on TB management in children introduced in country	Number of childhood TB cases	Number of childhood TB cases disaggregated by active (contact, risk group examination) and passive case finding	Active: Akm - 22 (58,3%) SKO - 35 (51,7%) NKO - 14 (80%) EKO - 59 (69,7%) Passive: Akm - 11 (41,7%) SKO - 46 (48,3%) NKO - 5 (20%) EKO - 24 (30,4%)		Active: Akm - 20 (64,5%) SKO - 41 (51,9%) NKO - 14 (77,8%) EKO - 60 (72,3%) Passive: Akm - 11 (35,5%) SKO - 38 (48,1%) NKO - 4(22,2%) EKO - 23 (27,7%)	Plan on TB in children has been drafted by the team of TB in children specialists from the national level and project sites trained in WHO Collaborative Center in Riga.	Plan will be finalized and submitted for approval.

Technical Area 2. Laboratories								
Expected Outcomes		Outcome Indicators	Indicator Definition	Baseline	Target	Result	Highlights of the Quarter	Challenges and Next Steps to Reach the Target
					Y1	Y1		
1	Laboratory strategic planning capacity improved	Developed National laboratory strategic plan	National laboratory strategic plan is developed Yes/No	NO		NO	Draft of National Laboratory plan was developed by the team of laboratory specialists from NRL, project sites, department of laboratory diagnostics of State Medical University, Quality project, CDC. Four-day supportive supervision visit was conducted by regional laboratory TO to North Kazakhstan (23-29 October 2011) and to East Kazakhstan (19-24 December 2011).	Finalization of National Laboratory plan.
2	Management of laboratory services improved	Number of laboratories that have updated laboratory SOPs in line with WHO standards (number and percent)	Number of culture laboratories that have SOPs in line with WHO standards out of total number of culture laboratories in project sites (number and percent)	0		0	One day seminars were conducted during supportive supervision visits of the regional laboratory technical officer to North and East Kazakhstan oblasts with laboratory staff on adaptation of NRL's maintenance SOPs to the oblasts conditions. Total participants in NKO- 19 laboratory specialists (16 female, 3 male), in EKO-18 participants (all female)	Oblast laboratory specialists will adapt maintenance SOPs. Testing adapted maintenance SOPs.

3	TB diagnostic capability enhanced through introduction of new diagnostic tools	TB patients diagnosed by GenExpert (number and percent)	TB patients diagnosed by GenExpert in project sites (number and percent out of all TB patients in project sites) disaggregated by TB/MDR TB	0		0	Two-day regional workshop on introduction of Xpert was conducted with technical assistance of WHO and in collaboration with the Quality project for NTPs managers, NRLs, PIU GF and partners (Quality) from CA countries. A two-week TA mission was conducted by Manuela Rehr (PMU TB CARE I) in November to assist in development of Xpert strategy for CAR, plan Xpert implementation, adaptation of diagnostic algorithm and selection of sites. Several meetings and activities were conducted to prepare for Xpert implementation. Diagnosis with Xpert will not begin until APA2.	Procurement of Xpert machines to the country. Finalization of Xpert CAR strategy. Approval of Xpert implementation plan. Approval of clinical protocols by NTP. Final decision on selection of Xpert sites and preparation of sites for placing Xpert machines. Adaptation of generic SOPs after procurement of Xpert MTB/Rif machines and site selection. Development of training package for Xpert sites.
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Technical Area 3. Infection Control								
Expected Outcomes		Outcome Indicators	Indicator Definition	Baseline	Target	Result	Highlights of the Quarter	Challenges and Next Steps to Reach the
					Y1	Y1		
1	Introduce and scaled-up of minimum package of IC interventions in key facilities in project sites	Ratio of TB notification rate in health care staff	Ratio of TB notification rate in health care staff over the TB notification rate in general population, adjusted by age and sex in project sites	310,1 per 100 000 health care staff		306,1 per 100 000 health care staff	Thematic working group on TB-IC was established in November. A five-day mission was conducted by Vlad Furman in November to assist the TB-IC working group in development of national guidelines and adjustment of the TB-IC assessment tool. The national TB-IC plan was developed and submitted to the MoH for comments. TB-IC prikaz was drafted. The working group finalized TB IC guidelines and adapted TB IC toolkit.	TB IC guideline and adapted toolkit will be presented at the NTP level in February 15, 2012.

2	Developed local capacity on TB IC	Key facilities with a designated TB IC focal person in each project site including prison sector (number and percent)	Key facilities with a designated TB IC focal person in each project site including prison sector (number and percent) disaggregated by prison and civil sector	local engineers trained in TB-IC - 0	5	4	Completed	It was planned to send 5 engineers for training but only four have been confirmed. Trained engineers will be involved in development and facilitation of training on TB-IC.
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Technical Area 4. PMDT								
Expected Outcomes		Outcome Indicators	Indicator Definition	Baseline	Target Y1	Result Y1	Highlights of the Quarter	Challenges and Next Steps to Reach the
1	PMDT scale up in civilian and prison sectors	MDR TB cases put on treatment (number and percentage of diagnosed MDR TB cases)	Number and % of lab-confirmed MDR-TB patients enrolled on 2nd-line anti-TB treatment among all lab-confirmed MDR-TB cases during reporting period in project sites disaggregated by civil and prison sector	Civil Akm - 324 (62,3%) SKO - 470 (80,9%) NKO - 285 (58%) EKO - 473 (64,8%) Prison: Akm - 28 (77,8%) NKO - 27 (42%) SKO - 28 (33%) EKO - 30 (22%)	85% in 2015	Civil , whole country-5311 (72)% Akm - 351 (94,9%) SKO - 227(42,0%) NKO - 276 (67,5%) EKO - 319 (52,1%) Prison , whole country - 128 (29,9%) Akm - 26 (82,0%) NKO - 22 (44%)	PMDT action plans developed and submitted to the oblast healthcare authorities for approval. PMDT protocols drafted in accordance with latest WHO recommendations. Draft PMDT training curricula developed.	Because NTP is revising national TB/MDRTB policies (prikaz, TB guideline), finalization of PMDT protocols is delayed until the national policy will be updated.
2	Improved X/MDR TB management in children	Number of children put on MDR TB treatment in accordance with international guidelines (number and percentage out of all children diagnosed with MDRTB)	Number of children put on MDR TB treatment in accordance with international guidelines (number and percentage out of all children diagnosed with MDRTB) disaggregated by oblasts	Akm - 2 (100%) SKO - 1 (100%) NKO - 1 (100%) EKO - 2 (100%)		Akm - 4 (100%) SKO - 4 (100%) NKO - 3 (100%) EKO - 2 (100%)	Protocols on X/MDRTB in children were drafted.	Draft protocol on TB in children will be finalized after update of national prikaz and guideline.

Technical Area 5. TB/HIV								
Expected Outcomes		Outcome Indicators	Indicator Definition	Baseline	Target	Result	Highlights of the Quarter	Challenges and Next Steps to Reach the
					Y1	Y1		
1	Increased demand for TB/HIV activities	Country has a National strategic plan on TB/HIV collaborative activities in line with WHO standards	National strategic plan on TB/HIV collaborative activities is in line with WHO standards and available in country (yes/no)	NO		1	Prikas and National plan on TB-HIV were finalized.	Final prikaz and national plan on TB-HIV will be submitted to MoH for approval.
2	Increased number of TB and HIV patients that are receiving care and treatment	People living with HIV, screened for TB in HIV care settings (VCT, ANC, PMTCT, MCNH and ART clinics) (number and percent)	People living with HIV, screened for TB in HIV care settings (VCT, ANC, PMTCT, MCNH and ART clinics) (number and percent) in project sites	75%	95%	75%	TB-HIV national order has been updated based on recently revised clinical protocols.	Finalization of National order on TB-HIV. Initiated only National order and arrangements for implementation are not held, because results isn't reached.




Technical Area 6. Health Systems Strengthening								
Expected Outcomes		Outcome Indicators	Indicator Definition	Baseline	Target	Result	Highlights of the Quarter	Challenges and Next Steps to Reach the Target
					Y1	Y1		
1	Improved local human resource capacity	Number of local trainers trained	Number local trainers trained in each project site	12		12 (all females)	Recommendations for NTP on e-library were provided by an HRD consultant (Ieva Leimane).	Recommendations will be translated in Russian and provided to NTP for implementation.







2	Improved patient adherence to treatment	Default rate among TB patients	Default rate among TB patients in project sites disaggregated by TB and MDR TB	Sens TB Akm - 1,8% SKO - 3,7% NKO - 2,4% EKO - 4,3% MDR TB Akm - 0% SKO - 6,4% NKO - 3,6% EKO - 4,7%		Sens TB Akm - 1,1% SKO - 2,3% NKO - 1,2% EKO - 4,8% MDR TB Akm - 0% SKO - 6,6% NKO - 3,5% EKO - 4,6%	One day RTs on establishment of patient support system was conducted by regional TO in Shymkent (SKO) and in Petropavlovsk (NKO). Monitoring tool on patient support system was tested and finalized. Psychosocial support was provided by patient support groups to 243 TB/MDR-TB patients in East Kazakhstan oblast. Tool for assessment of social support was revised and sent to new project sites (Akmola, NKO and SKO) for gathering detailed information about social support provision, needs, available funding, legal basis.	Establishment of working groups on development of patients support system in new project sites (Akmola, SKO, NKO). Collection and analysis of information on social support in new project sites.
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Technical Area 7. M&E, OR and Surveillance								
Expected Outcomes		Outcome Indicators	Indicator Definition	Baseline	Target	Result	Highlights of the Quarter	Challenges and Next Steps to Reach the
					Y1	Y1		
1	Improved surveillance system (including MDR TB and TB/HIV)	1)Reporting units at all levels of data flow submitting timely reports according to national guidelines (number and percentage) 2)Feedback from systematic analysis of surveillance and programmatic data and related recommendations provided by central to lower levels	1)Reporting units at all levels of data flow in project sites submitting timely reports according to national guidelines (number and percentage) 2)Reporting units that have received feedback from central level (number and percentage)	1) 4 (100%) 2) 0 (0%)		1) 4 (100%) 2) 2 (50%)	Working group from NTP and international organizations was established. Revision of recording and reporting forms (laboratory and drug management parts) and development of algorithm of reporting system for electronic surveillance.	Finalization of recording and reporting forms.
2	Strengthened local capacities on OR	Operations research studies completed & results disseminated (number)	Number of operations research studies completed & results disseminated	0		0	Draft OR protocol on evaluation of effectiveness of patient support system in EKO.	Finalization of OR protocol on effectiveness of patient support in EKO. Preparation for OR.



Technical Area 8. Drug supply and management								
Expected Outcomes		Outcome Indicators	Indicator Definition	Baseline	Target	Result	Highlights of the Quarter	Challenges and Next Steps to Reach the
					Y1	Y1		
1	Improved drug management in project sites	Number of oblast with quarterly oblast stock information available for both first and second line drugs	Number of oblast in TB CARE I project sites with quarterly oblast stock information available (both for first and second line drugs)/total number of oblasts in project sites	4	4	4	Two-day training on practical skills in calculation of anti-TB drugs needs for oblast drug management coordinators from four project sites (Akmola, EKO, NKO, SKO) was conducted by Anastasia Samoilova and NTP National Coordinator on November 24-25 for civil and prison sectors. Tool for calculation of needs in first and second line drugs was	Tool for calculation of needs in FLD and SLD will be finalized.

Quarterly Activity Plan Report









Outcomes	1. Universal and Early Access		Lead Partner	Approved Budget	Cumulative Completion	Planned Completion		Cumulative Progress and Deliverables up-to-date
						Month	Year	
1.1 Improved TB control in prisons	1.1.1	Assesment visits on TB control in prisons in project sites	KNCV	8.197	 100%	Jun	2011	Assessment of TB control program in prisons was part of assessment mission to four project sites Akmola, East Kazakhstan, North Kazakhstan and South Kazakhstan. Missions have been conducted in May and June.
	1.1.2	Workshop on revision&developmen t of protocols on management of TB (DRTB) in prisons	KNCV	7.679	 100%	Sep	2011	Two-day workshop to discuss draft protocols on management of TB and DRTB was conducted for both civil and prison TB services from 28 till 29 September in Almaty. Four MDR TB doctors from prison TB hospitals of East Kazakhstan, South Kazakhstan, Akmola and North Kazakhstan oblasts participated in the workshop. As a result pre-final versions of protocols have been discussed.
	1.1.3	Supportive supervision visits to project sites	KNCV	5.374	postponed	Sep	2012	The visit was postponed by prison authorities due to lack of a newly signed memorandum of understanding. Moved to APA2
	1.1.4	Training of prison medical staff in new project sites	KNCV	3.404	postponed	Jun	2012	Moved to APA 2
	1.1.5	Workshops for prison administration	KNCV	26.466	postponed	May	2012	Moved to APA 2
	1.1.6	Workshop on involvement of local NGOs in TB control in prisons	KNCV	15.859	 100%	Sep	2011	Two-day workshop on role of local NGOs in TB control including prison system was conducted for selected local NGOs from Akmola, East Kazakhstan, North Kazakhstan and South Kazakhstan and Almatinskaya oblasts. Totally 19 representatives of 15 local NGOs and two ex-MDR TB patients (17 females and 2 males) and participated in the workshop. Two ex-MDR TB patients are planning to create patient support NGO in East Kazakhstan.



	1.1.7	TA on reorganization of TB services in prisons	KNCV	1.683	 100%	Sep	2011	<p>TB CARE provided TA during one-day meeting devoted to discussion about reorganization of MDR TB services in prison system. As a result prison system decided to conduct deep analysis in order to make final decision on centralization. TB CARE shared with prison system SWOT analysis.</p> <p>Technical assistance was provided by TB CARE to prison system during discussion on transfer of prison medical service from prison system to the MoH.</p> <p>Further technical assistance will be needed for development of policy documents.</p>
1.2 Strengthened TB control in migrants	1.2.1	Round table meeting on development of TWG	KNCV	2.538	 0%	Mar	2012	This activity is moved to APA2 because NTP is not ready yet to start work on TB in migrants and therefore there was delay with establishment of TWG on TB in migrants at NTP level. It will be held after Regional high level meeting on cross-border TB control in Central Asia scheduled for 28 - 29 November 2011 in Almaty as a follow up.
	1.2.2	Analysis of policy and practices related to TB control in migrants	KNCV	3.251	 50%	Apr	2012	<p>Assesment was done in all project sites. Partners meetings on establishment of TWG have been conducted.</p> <p>Establishment of TWG on TB in migrants and review of existing policy will be done in APA 2.</p>
1.3 International standards on TB management in children introduced in country	1.3.1	Training on TB management in children	KNCV	21.691	 100%	Aug	2011	Five childhood TB specialists from project sites (Akmola, North Kazakhstan, South Kazakhstan and East Kazakhstan) trained in childhood TB in Riga, Latvia.
	1.3.2	Development of action plan to scale up TB management in children	KNCV	15.583	 75%	Feb	2012	<p>TB in children is included in PMDT action plans of four project sites (East Kazakhstan, Akmola, North Kazakhstan and South Kazakhstan).</p> <p>Plan of TB in children was drafted.</p>
					 78%			






	2. Laboratories					Planned Completion		Cumulative Progress and Deliverables up-to-date	
Outcomes			Lead Partner	Approved Budget	Cumulative Completion	Month	Year		
2.1 Laboratory strategic planning capacity improved	2.1.1	Development of National strategic plan	KNCV	6.040	<div><div></div></div> 75%	Feb	2012	Working group was established. Four-day supportive supervision visit was conducted by regional laboratory TO in East Kazakhstan on 19-24 December 2011 and to North Kazakhstan on 23-29 October 2011. National laboratory plan drafted.	
	2.1.2	Continious supportive supervision	KNCV	33.827	<div><div></div></div> 75%	Feb	2012	Two four-day supportive supervision visits were conducted to NKO (23 - 29 October) and EKO (19 -24 Dec) by regional laboratory TO.	
2.2 Management of laboratory services improved	2.2.1	Development of guidelines on laboratory maintenance	KNCV	10.933	<div><div></div></div> 75%	Feb	2012	Draft guideline, SOP and plan on laboratory maintenance developed. One-day seminars were conducted in NKO and EKO for laboratory staff to adapt laboratory maintenance SOPs. Total participants in NKO- 19 (16 -Female, 3 Male), in EKO-18 - Female.	
	2.2.2	Updating of lab SOPs in accordance with international standards	KNCV	6.749	<div><div></div></div> 75%	Feb	2012	Existing laboratory SOPs have been revised in North Kazakhstan and East Kazakhstan oblasts.	









2.3 TB diagnostic capability enhanced through introduction of new diagnostic tools	2.3.1	Procurement of GenExpert and its related equipment	KNCV	191.829	 50%	Feb	2012	<p>Permission from the MoH received.</p> <p>Xpert implementation working group was established. Two-day regional WS on introduction of Xpert was conducted for NTPs of Kazakhstan, Kyrgyzstan, Uzbekistan, Tajikistan and Turkmenistan. Total number of participants from Kazakhstan - total 34 (22 Female, 12 Male).</p> <p>Two-week TA mission conducted by Manuela Rehr to assist in development of Xpert strategy, implementation plan, daptation of diagnostic algorithm and selection of sites.</p> <p>Two-day workshop was conducted during this mission for Xpert implementation working group and heads of treatment departments for the National TB Center. Total number of participants - 19 (11 female, 8-male). Facilities assessment for GeneXpert implementation was conducted in East Kazakhstan and North Kazakhstan during supportive supervision visits by the regional laboratory TO in October and December and in Almaty CIty TBD during mission of Manuela Rehr in November.</p> <p>Generic SOPs for Xpert have been translated in Russian. Adaptation of Lab forms and National register of TB patients is in process.</p>
	2.3.2	Introduction and piloting of GenExpert	KNCV	9.262	postponed	Sep	2012	Moved to APA2
	2.3.3	Introduction of FL&SL Hain test	KNCV	14.506	Cancelled	Dec	2011	<p>This activity is cancelled because procurement of test for SL Hain will be done by GF project, laboratory SOPs will be developed by Quality project.</p> <p>It is proposed to reprogram this activity to bench-on training for laboratoty specialists from East Kazakhstan, North Kazakhstan and Akmola oblasts at SNRL in Borstel.</p> <p>Expenses will be shared with SNRL.</p>
					 70%			





	3. Infection Control					Planned Completion		Cumulative Progress and Deliverables up-to-date	
Outcomes			Lead Partner	Approved Budget	Cumulative Completion	Month	Year		
3.1 Introduce and scaled-up of minimum package of IC interventions in key facilities in project sites	3.1.1	Development of IC guidelines and regulatory documents in accordance with international standards	KNCV	5.012	<div><div></div></div> 75%	Feb	2012	Thematic working group on TB-IC was established in November. Five-day mission was conducted by Vlad Furman in November to assist TB-IC working group in development of national guideline and adjustment of TB-IC assessment tool. National TB-IC plan was developed and submitted to the MoH for comments. TB-IC prikaz was drafted. Working group finalized TB IC guidelines and adapted TB IC toolkit.	
	3.1.2	Introduction of TB IC assesment guide and checklist	KNCV	1.354	<div><div></div></div> 75%	Feb	2012	Adjusted TB-IC assessment tool.	
	3.1.3	IC assessment visits to project sites	KNCV	3.827	<div><div></div></div> 100%	Jul	2011	TB-IC assessment missions have been conducted to two project sites (East Kazakhstan and Akmola) by regional TB-IC consultant.	
	3.1.4	Procurement of IC equipment for risk assessment and protection measures	KNCV	80.400	postponed	Sep	2012	Moved to APA2	
	3.1.5	Continious supportive supervision	KNCV	5.374	Cancelled	Sep	2011	Due to late start of project implementation supportive supervision was not conducted and activity was modified.	
3.2 Developed local capacity on TB IC	3.2.1	Training on environmental aspects of TB IC	KNCV	10.493	<div><div></div></div> 100%	Jun	2011	Three engineers from three ventilation companies in Almaty, East Kazakhstan and Astana attended special TB-IC course for engineers in Vladimir. MoU between NTP and ventilation companies is signed.	
					<div><div></div></div> 88%				



	4. PMDT					Planned Completion		Cumulative Progress and Deliverables up-to-date	
Outcomes			Lead Partner	Approved Budget	Cumulative Completion	Month	Year		
4.1 PMDT scale up in civilian and prison sectors	4.1.1	Workshop on finalization of EKO action plan for PMDT	KNCV	1.982	 100%	Dec	2011	One-day workshop was conducted to discuss pre-final versions of PMDT action plans of East Kazakhstan oblast and three new project sites. Specialists of oblast TB control programs from project sites (Akmola, East Kazakhstan, North Kazakhstan and South Kazakhstan), NTP, prison system, SES, Project Quality and GF participated in the workshop. Totally 30 participants (23 females and 7 males) from TB services of four project sites participated in the workshop. It was agreed that plans will be presented to the oblasts' health departments for approval.	
	4.1.2	Monitoring and TA visits to EKO	KNCV	22.572	 100%	Sep	2011	Monitoring visit to East Kazakhstan oblast was conducted by regional TO.	
	4.1.3	Assessment visits to new project sites	KNCV	53.477	 100%	Jun	2011	Assessment visits to four project sites (East Kazakhstan, Akmila, South Kazakhstan and North Kazakhstan) have been conducted in May - June.	
	4.1.4	Development of PMDT action plans in new project sites	KNCV	5.456	 75%	Feb	2012	This activity was linked to act. 4.1.1. Specialists from three new project sites participated in a one-day workshop on discussion of pre-final PMDT plans. Four oblasts shared their experience and suggestions for PMDT plans. PMDT plans were developed and submitted to oblast healthcare authorities for approval.	
	4.1.5	Finalization of DR TB management protocols for new project sites	KNCV	7.145	 75%	Apr	2012	DR TB management protocols have been revised by the MDRTB thematic working group in accordance with the latest WHO recommendations. NTP took a decision to revise national DR TB guidelines. Therefore, it was decided to finalize protocols after the revision of the guideline. Work will be continued in APA2.	
	4.1.6	Training on X/MDR TB clinical management in project sites	KNCV	5.000	 75%	Feb	2012	Training curricula on M/XDRTB were drafted.	
	4.1.7	Monitoring visits to new project sites	KNCV	5.307	 100%	Sep	2011	Monitoring visits were conducted to three project sites (Akmola, North Kazakhstan and South Kazakhstan).	
	4.1.8	Participation in international conferences	KNCV	23.053	 100%	Dec	2011	Five representatives from National level and project sites participated in the Wolfheze workshop on PMDT in June in The Netherlands.	






4.2 Improved X/MDR TB management in children	4.2.1	Development of protocols on X/MDRTB management in children	KNCV	4.090	 75%	Apr	2012	Protocol on TB in children was drafted by the team of TB in children specialists. On-distance TA was provided by international expert from Latvia (I.Ozere). Protocols will be finalized in APA2 after revision of national guideline on MDR/XDR TB where childhood TB will be included.
					 89%			

		5. TB/HIV				Planned Completion Month Year		Cumulative Progress and Deliverables up-to-date
Outcomes			Lead Partner	Approved Budget	Cumulative Completion			
5.1 Increased demand for TB/HIV activities	5.1.1	Workshop on TB/HIV collaboration		1.025	 100%	Jul	2011	One-day workshop was conducted for TB and HIV services to strengthen collaboration between two programs. As a result of workshop it was decided to develop national TB and HIV collaborative activities plan and revision of existing clinical protocols on TB-HIV. New membership of TB and HIV thematic working group was agreed. Total number of participants - 12 (7 females and 5 males).
	5.1.2	Assessment of TB-HIV collaborative activities implementation in the project sites		10.885	 100%	Jun	2011	Assessment of TB-HIV collaborative activities implementation in four project sites (Akmola, East Kazakhstan, North Kazakhstan and South Kazakhstan) was conducted in May-June.
	5.1.3	Development of National plan on TB/HIV collaboration		1.072	 100%	Dec	2011	One-day workshops was conducted in November for the TB-HIV thematic working group on the development of a National plan on TB-HIV collaborative activities. Total number of participants - 12 (7 females and 5 males). Final version is prepared and submitted to MoH for approval.
5.2 Increased number of TB and HIV patients that are receiving care and treatment	5.2.1	Revision and adjustment of existing clinical protocols on TB/HIV		909	 100%	Dec	2011	One-day meeting for TB-HIV thematic working group was conducted in November to discuss revision of existing Prikaz to adjust it to recent WHO recommendations. Finalization of the policy document is completed and submitted to MoH for approval.
					 100%			

Outcomes	6. Health Systems Strengthening		Lead Partner	Approved Budget	Cumulative Completion	Planned Completion		Cumulative Progress and Deliverables up-to-date
						Month	Year	
6.1 Improved local human resource capacity	6.1.1	Training on "strategic planning and innovation"	KNCV	16.522	 100%	Aug	2011	Two representatives from NTP (one from national level and one from project site -North Kazakhstan oblast) and from project team participated IUATLD training course on Strategic planning and Innovation.
	6.1.2	Development of HRD plan for TB	KNCV	8.111	 50%	Apr	2012	Recommendations for development of an HRD plan have been developed. Development of the HR plan requires more time and will be done in APA2.
	6.1.3	Strengthening of training capacities of local trainers	KNCV	11.578	 50%	May	2012	It is not feasible to finalize the development of training modules since NTP is planning to revise national guidelines. Development of training modules will be done in APA2.
	6.1.4	Development of plan for sustainable e-library in Russian and English languages	KNCV	8.111	 75%	Feb	2012	Inventory of existing resources for e-library in Russian and English languages was conducted by HR consultant. Recommendations for creating an e-library were developed.
	6.1.5	Regional introductory workshop for implementation of TB CARE I, QHCP and Dialoge projects in CAR	KNCV	61.753	 100%	Sep	2011	Two day regional meeting on harmonization of activities with participation of representatives from NTP, prison system, SES, GF, Quality project, Dialogue was conducted in Almaty in July. Totally 10 participants from Kazakhstan (6 females and 4 males) participated.
6.2 Improved patient adherence to treatment	6.2.1	Supervision visits to EKO	KNCV	1.411	 100%	Jul	2011	Supervision visit to patient support system in East Kazakhstan oblast was conducted by regional TO in July. During the visit regional TO discussed tool on monitoring of social support with TB service and social support department and next steps for strengthening of patient support system.
	6.2.2	Development of monitoring tool of patient support	KNCV	1.439	 100%	Dec	2011	Monitoring tool is tested and finalized.
	6.2.3	Social support delivery in EKO	KNCV	32.500	 100%	Dec	2011	243 TB/MDRTB patients have been enrolled on a patient psychosocial support system in Semey and Oskemen (East Kazakhstan oblast).

	6.2.4	Workshop on capacity building of NGO's in EKO	KNCV	5.626	 100%	Sep	2011	This activity was combined with activity 1.1.6. In two-day workshop for NGOs 4 representatives of four local NGOs and three ex-MDR-TB patients participated in event conducted 26-27 September in Almaty. Ex-MDR TB patients are planning to establish NGO to provide support to TB patients.
	6.2.5	Assessment visits on patient support system in new project sites	KNCV	3.929	 100%	Jun	2011	Assessment visits have been conducted in May-June.
	6.2.6	Development of patient support system	KNCV	5.965	 75%	Feb	2012	Two RTs on establishment of oblasts' working groups on development of a patient support system were conducted in South Kazakhstan on 3 November and North Kazakhstan on 16 November. Round table on patients support in Akmola oblast is postponed upon request from Oblast's akimat.
	6.2.7	Meeting of patient support working group in new project sites	KNCV	1.493	postponed	Dec	2011	Due to delay with development of patient support systems in new project sites, this activity will be moved to APA2.
					 86%			

		7. M&E, OR and Surveillance				Planned Completion Month Year		Cumulative Progress and Deliverables up-to-date
Outcomes			Lead Partner	Approved Budget	Cumulative Completion			
7.1 Improved surveillance system (including MDR TB and TB/HIV)	7.1.1	Workshop on data management for NTP and NAP	KNCV	8.820	 100%	Sep	2011	One-day workshops on improvement of surveillance system with focus on improvement of data collection and analysis have been conducted for prison and civil TB services of four project sites (Akmola, East Kazakhstan, North Kazakhstan and South Kazakhstan) during supportive supervision visits. Total number of trained specialists: North Kazakhstan oblast - 23 participants (3 males, 20 females), Akmola - 26 participants (4 males, 22 females), SKO - 33 participants (10 males, 21 females), EKO - 26 participants (3 males, 23 females).
	7.1.2	Improvement of National TB surveillance system	KNCV	38.449	 100%	Sep	2011	Supportive supervision visits have been conducted to four project sites (Akmola, North Kazakhstan, East Kazakhstan and South Kazakhstan) for assessment of surveillance system and on-job training for specialists responsible for data entry, data analysis and reporting.

	7.1.3	Adjustment of existing M&E tool	KNCV	7.736	 75%	Feb	2012	Five meetings of working group were conducted to revise recording and reporting forms and surveillance system.
7.2 Strengthened local capacities on OR	7.2.1	Workshop on development of National TB research agenda	KNCV	14.037	 100%	Sep	2011	Two-day workshop on development of National TB research agenda fro the period 2012 - 2015 was conducted in September. Basis for national research agenda and list of potential ORs have been developed. 15 people (4 male, 11 female) from NTP, four project sites, SES, NAP and partner organizations participated in the workshop.
	7.2.2	Development of protocol on evaluation of new diagnostics	KNCV	13.179	 25%	May	2012	Activity will be finalized in APA2.
	7.2.3	Development of protocol for evaluation of new models of care	KNCV	11.006	 25%	Jul	2012	Activity will be continued in APA 2.
	7.2.4	Development of protocol for evaluation of patient support model	KNCV	11.815	 100%	Feb	2012	Protocol was drafted.

 75%

8. Drug supply and management		Lead Partner	Approved Budget	Cumulative Completion	Planned Completion		Cumulative Progress and Deliverables up-to-date	
Outcomes					Month	Year		
8.1 Improved drug management in project sites	8.1.1	Scale up of local capacity on drug management	KNCV	8.838	<div><div></div></div> 100%	Sep	2011	Two-day training on Drug management for prison and civil sectors for 4 project sites was conducted in Almaty, 24-25 October 2011. A tool for calculation of first and second line drugs was presented to participants. Total number of trained specialists: (1 male, 2 female) NKO - 3 participants, (2 female) Akmola-2 participants, (2 female) SKO-2 participants, (2 female) EKO- 2 participants, Almaty- 1 female participants. Total: 10 participants (9 femaile, 1 male).

 100%

Quarterly Activity Plan Modifications

Request for Cancellation or Discontinuation of Activities								
Approved By (write dates)			Old Code	1. Universal and Early Access	Lead Partner	Remaining Budget	Proposed Budget*	Replace with the following activity (if any)
Mission	PMU	USAID		Activities from the Work Plan				

Request for Postponement of Activities								
Approved By (write dates)			Old Code	1. Universal and Early Access	Lead Partner	Remaining Budget	Extension APA1/APA 2	Remarks
Mission	PMU	USAID		Activities from the Work Plan				

Request for Adding New Activities to the Current Work Plan							
Approved By (write dates)			New Code	2. Laboratories	Lead Partner	Proposed Budget*	Remarks
Mission	PMU	USAID		Proposed New Activities			

Quarterly GeneXpert Report

Country	Kazakhstan
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Period	October-December 2011
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Table 1: GeneXpert instruments and cartridges procured or planned by quarter

	Procured			# still planned for procurement in APA 2	Month, Year procurement planned (i.e. April 2012)
	Jan-Sep 2011	Oct-Dec 2011	Jan-Dec 2011		
# GeneXpert Instruments	0	0	0	4	February, 2012
# Cartridges	0	0	0	6000	February, 2012

Table 2: Cumulative List of GeneXpert Instruments Procured to Date or Planned in the Next Quarter

Already procured or still planned? (i.e. Write "Procured" or "Planned")	Instrument	# of Modules (1, 2, 4, or 16)	Location(s) (facility name & city/ province or TBD)	USG Funding Source (e.g., PEPFAR COP FYxx, USAID) ¹	Partner/ Implementing Organization; Additional Comments
planned	1	4	NCPT	USAID	KNCV RO
planned	2	4	Almaty city dispensary	USAID	KNCV RO
	3	4	Akmola in two levels (oblast and rayon)	USAID	KNCV RO
planned	4	4	East Kazakhstan	USAID	KNCV RO/pending
planned	5				
	6				
	7				
	8				

¹ Differentiating between PEPFAR and USAID-funded is important. If it is PEPFAR funded, specify the fiscal year (i.e. FY2011).

Table 3: Cumulative Xpert MTB/RIF Cartridges Procured to Date or Planned for Next Quarter

Already procured or still planned? (i.e. Write "Procured" or "Planned")	Order #	# of Cartridges*	Location(s) (facility name and city/ province or TBD)	USG Funding Source (e.g., PEPFAR COP FYxx, USAID) ¹	Comments
Planned	1	1500	NCPT	USAID	
Planned	2	1500	Almaty city dispensary	USAID	
Planned	3	1500	Akmola in two levels (oblast and rayon)	USAID	
Planned	4	1500	East Kazakhstan	USAID	pending
	5				

*There are 10 cartridges per kit, but we need the total # of **cartridges** (not kits)

Any additional information/clarifications to the above (optional)

N/A

Please provide a brief description of any significant problems encountered in use of the GeneXpert machine(s) and Xpert MTB/RIF cartridges

N/A

Please describe technical assistance or evaluation of implementation activities performed and planned.

Quarterly Photos (as well as tables, charts and other relevant materials)



Arman Toktabaynov, USAID CAR and Sharafiddin Yuldashev, TB CARE I discuss algorithm with Uzbek team
Sub-regional Workshop on
Rapid Diagnosis of Tuberculosis and Rifampicin Resistance
by the GeneXpert System, 15-16 November 2011



Aigul Tursynbayeva is involved in working group discussion with Kazakhstan team
Sub-regional Workshop on
Rapid Diagnosis of Tuberculosis and Rifampicin Resistance
by the GeneXpert System, 15-16 November 2011



Some participants and facilitators of
Sub-regional Workshop on
Rapid Diagnosis of Tuberculosis and Rifampicin Resistance
by the GeneXpert System, 15-16 November 2011

Inventory List of Equipment TB CARE I

Organization:	TB CARE I
Country:	Kazakhstan
Reporting date:	30-jan-12
Year:	2011



USAID
FROM THE AMERICAN PEOPLE

TB CARE I

Description (1)	Quantity	ID numbers (2)	Acquisition cost (4)	V.A.T (5)	Location (6)	Condition	Disposition date (8)	Insurance policy number	Insurance Policy #
ND ASUS K43E, Core i3-2310M-2100/320G5/3GB/DVD-RW/802.11B.g/BT/14*HD/nob/nom	1	B3N0BC352978137	109.628,00 KZT	11.745,86 KZT	RO, Almaty	good			
ND ASUS K43E, Core i3-2310M-2100/320G5/3GB/DVD-RW/802.11B.g/BT/14*HD/nob/nom	1	B3N0BC353159132	109.628,00 KZT	11.745,86 KZT	RO, Almaty	good			
ND ASUS K43E, Core i3-2310M-2100/320G5/3GB/DVD-RW/802.11B.g/BT/14*HD/nob/nom	1	B3N0BC353033135	109.628,00 KZT	11.745,86 KZT	RO, Almaty	good			
ND ASUS K43E, Core i3-2310M-2100/320G5/3GB/DVD-RW/802.11B.g/BT/14*HD/nob/nom	1	B3N0BC352876139	109.628,00 KZT	11.745,86 KZT	RO, Almaty	good			
Panasonic/KX-TS2365RUW	1	1ABKH651239	8.850,00 KZT	948,21 KZT	RO, Almaty	good			
Panasonic/KX-TS2365RUW	1	1ABKH651248	8.850,00 KZT	948,21 KZT	RO, Almaty	good			
Panasonic/KX-TS2365RUW	1	1ABKH651250	8.850,00 KZT	948,21 KZT	RO, Almaty	good			
Win Pro 7 64-bit Russian CIS and Georgia 1pk	12	00071	355.296,00 KZT	38.067,43 KZT	RO, Almaty	good			
Office Home and Business 2010, 32/64 English no EU	4	00072	191.996,00 KZT	20.571,00 KZT	RO, Almaty	good			
OfficeMultiLangPk 2010 Olp NL	4	00073	20.000,00 KZT	2.142,86 KZT	RO, Almaty	good			
Dr Web SSecurity Pro (K3) 1 electronic license, 1 year	12	00074	58.560,00 KZT	6.274,29 KZT	RO, Almaty	good			
Dr Web Server Security	2	00075	44.800,00 KZT	4.800,00 KZT	RO, Almaty	good			
Switch, 16 port 10/100/1000 Mbit, Tenda TEG1016D, Auto MDI/MDI-X, rack/dekstop, int PS	1	00076	19.926,00 KZT	2.134,93 KZT	RO, Almaty	good			
Language Pack (LP)	5	00077	24.000,00 KZT	2.571,43 KZT	RO, Almaty	good			
Office chairs, Torino	1	00078	7.200,00 KZT	771,43 KZT	RO, Almaty	good			

Office chairs, Torino	1	00079	7.200,00 KZT	771,43 KZT	RO, Almaty	good			
Office chairs, Torino	1	00080	7.200,00 KZT	771,43 KZT	RO, Almaty	good			
Office chairs, Torino	1	00081	7.200,00 KZT	771,43 KZT	RO, Almaty	good			
Mobile Cabinet	1	00082	14.500,00 KZT	1.553,57 KZT	RO, Almaty	good			
Mobile Cabinet	1	00083	14.500,00 KZT	1.553,57 KZT	RO, Almaty	good			
Telephone system cabinet	1	00084	9.200,00 KZT	985,71 KZT	RO, Almaty	good			
Office table	1	00085	13.200,00 KZT	1.414,29 KZT	RO, Almaty	good			
Table top	1	00086	8.800,00 KZT	942,86 KZT	RO, Almaty	good			
Camera, Canon Power Shot S95	1	4343B001 [AA]	78.120,00 KZT	8.370,00 KZT	RO, Almaty	good			

- (1) Description of equipment: transportation (vehicles), administration (computers, faxes), laboratory equipment or others
(2) Identification number (eg Manufacturer's serial number, model number, Federal stock number, national stock number)
(3) Date of invoice
(4) Total price including any sales tax paid. Use currency on invoice
(5) Note any sales tax charged
(6) Address
(7) Good/fair or bad
(8)+(9) Ultimate disposition data, (in the case of a vehicle) including date of disposal and sales price or the method used to determine current fair market value.

where a recipient compensated TB CARE I for its share. Attach supplementary info